

AMENDED IN ASSEMBLY JUNE 20, 2011

AMENDED IN SENATE APRIL 27, 2011

AMENDED IN SENATE APRIL 7, 2011

AMENDED IN SENATE MARCH 23, 2011

**SENATE BILL**

**No. 380**

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**Introduced by Senator Wright**

February 15, 2011

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An act to amend Section 2190 of, *and to add Sections 2196.6 and 2196.7 to*, the Business and Professions Code, relating to medicine.

LEGISLATIVE COUNSEL'S DIGEST

SB 380, as amended, Wright. Continuing medical education.

Existing law, the Medical Practice Act, provides for the licensure and regulation of physicians and surgeons by the Medical Board of California. Under that act, the board is required to adopt and administer standards for the continuing education of physicians and surgeons. Existing law requires physicians and surgeons to complete a mandatory continuing education course in the subjects of pain management and the treatment of terminally ill and dying patients, except that it does not apply to physicians and surgeons practicing in pathology or radiology specialty areas. *Existing law also requires the board to periodically disseminate information and educational material regarding detection of spousal or partner abuse to physicians and surgeons and acute care hospitals.*

This bill would authorize the board to also set content standards for an educational activity concerning chronic disease, as specified. *The bill would require the board to periodically disseminate information and educational material regarding nutritional and lifestyle behavior*

*for prevention and treatment of chronic disease to physicians and surgeons and acute care hospitals. The bill would require the board to convene a working group regarding nutrition and lifestyle behavior, as specified.*

Vote: majority. Appropriation: no. Fiscal committee: yes.  
State-mandated local program: no.

*The people of the State of California do enact as follows:*

1 SECTION 1. The Legislature finds and declares all of the  
2 following:

3 (a) In 2008, U.S. health care spending was about \$7,681 per  
4 resident and accounted for 16.2 percent of the nation's gross  
5 domestic product; this is among the highest of all industrialized  
6 countries. Expenditures in the United States on health care  
7 surpassed \$2.3 trillion in 2008, more than three times the \$714  
8 billion spent in 1990, and over eight times the \$253 billion spent  
9 in 1980.

10 (b) It is estimated that health care costs for chronic disease  
11 treatment account for over 75 percent of national health  
12 expenditures.

13 (c) Seven out of 10 deaths among Americans each year are from  
14 chronic diseases. Heart disease, cancer, and stroke account for  
15 more than 50 percent of all deaths each year.

16 (d) The last major report from the World Health Organization  
17 in March 2003 concluded diet was a major factor in the cause of  
18 chronic diseases.

19 (e) Dramatic increases in chronic diseases have been seen in  
20 Asian countries since the end of WWII with the increase in the  
21 gross national product and change to the western diet.

22 (f) Only 19 percent of students believed that they had been  
23 extensively trained in nutrition counseling. Fewer than 50 percent  
24 of primary care physicians include nutrition or dietary counseling  
25 in their patient visits.

26 (g) Practicing physicians continually rate their nutrition  
27 knowledge and skills as inadequate. More than one-half of  
28 graduating medical students report that the time dedicated to  
29 nutrition instruction is inadequate.

30 SEC. 2. Section 2190 of the Business and Professions Code is  
31 amended to read:

1     2190. In order to ensure the continuing competence of licensed  
2 physicians and surgeons, the board shall adopt and administer  
3 standards for the continuing education of those licensees. The  
4 board may also set content standards for any educational activity  
5 concerning a chronic disease that ~~includes appropriate information~~  
6 ~~on the impact, prevention, and cure of the chronic disease by the~~  
7 ~~application of changes in~~ *includes appropriate information on*  
8 *prevention of the chronic disease, and on treatment of patients*  
9 *with the chronic disease, by the application of changes in nutrition*  
10 *and lifestyle behavior. The board shall require each licensed*  
11 *physician and surgeon to demonstrate satisfaction of the continuing*  
12 *education requirements at intervals of not less than four nor more*  
13 *than six years.*

14     *SEC. 3. Section 2196.6 is added to the Business and Professions*  
15 *Code, to read:*

16     2196.6. *The board shall periodically disseminate information*  
17 *and educational material regarding the prevention and treatment*  
18 *of chronic disease by the application of changes in nutrition and*  
19 *lifestyle behavior to each licensed physician and surgeon and to*  
20 *each general acute care hospital in the state.*

21     *SEC. 4. Section 2196.7 is added to the Business and Professions*  
22 *Code, to read:*

23     2196.7. *The board shall convene a working group of interested*  
24 *parties to discuss nutrition and lifestyle behavior for the prevention*  
25 *and treatment of chronic disease at one of its quarterly meetings*  
26 *within three years after the operative date of this section.*